Case 19-20120-GLT Doc 49 Filed 11/25/19 Entered 11/25/19 11:43:49 Desc Main IN THE UNITION STEATES BASEKIROTETCY COURT FOR THE WESTERN DISTRICT OF PENNSYLVANIA

| IN RE: |) | |
|--|-----------------------------------|--|
| n 1n n |) | |
| Pascal R. Passaga |) | G N 10 20120 |
| Colleen M. Passaga, |) | Case No. 19-20120 |
| Debtors |) | Chapter 13 |
| |) | |
| Colleen M. Passaga, |) | |
| Colleen M. Passaga |) | |
| Movant |) | |
| |) | |
| VS. |) | |
| |) | |
| No Respondents |) | |
| AMEN | NDMENT | COVER SHEET |
| A mandament (a) to the following notition list(s) | البراء معامم | a(a) an atatamant(a) and then emitted becauseth. |
| Amendment(s) to the following petition, list(s) |), schedul | e(s), or statement(s) are transmitted nerewith: |
| unsecured Sysco judgment currently listed on and out of an abundance of caution, the unse being amended to add the unsecured Sysco | that sche ecured Sy judgmen | endment: Schedule D is being amended to remove the edule. The case was initially filed on an emergency basis, esco judgment was placed on Schedule D. Schedule F is at and a notice address for Sysco is also being added to Sysco has also been updated to reflect the address on the |
| - | | |
| Official Form 6 Schedules (Itemizatio | n of Chan | iges Must Be Specified) |
| Summary of Schedules | | |
| Schedule A - Real Property | | |
| Schedule B - Personal Property | | |
| Schedule C - Property Claimed as Exe | | |
| XSchedule D - Creditors holding Secure | ed Claims | |
| Check one: | | |
| Creditor(s) added | | |
| NO creditor(s) added | | |
| _X Creditor(s) deleted | | |
| Schedule E - Creditors Holding Unsec | cured Prio | rity Claims |
| Check one: | | |
| Creditor(s) added | • | |
| NO creditor(s) added | | |
| Creditor(s) deleted | 1 3 7 | ' ' |
| XSchedule F - Creditors Holding Unsec | curea Non | priority Claims |
| Check one: | | |
| X Creditor(s) added | ı | |
| NO creditor(s) added | Į. | |
| Creditor(s) deleted | l I Inovenie | ad I agges |
| Schedule G - Executory Contracts and Check one: | ı onexpire | EU LUASUS |
| Check one: Creditor(s) added | | |
| NO creditor(s) added No creditor(s) added | Ì | |
| No creditor(s) added Creditor(s) deleted | ı | |
| Schedule H - Codebtors | | |
| Schedule I - Current Income of Individual | dual Debt | or(s) |
| | | \ / |

Schedule J - Current Expenditures of Individual Debtor(s)

| Case 19-20120-GLT Doc 49 Filed 11/25/19 Entered 11/25/19 11:43:49 Desc Main Statement of Financial Affairs Document Page 2 of 11 Chapter 7 Individual Debtor's Statement of Intention Chapter 11 List of Equity Security Holders Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims Disclosure of Compensation of Attorney for Debtor Other: |
|--|
| NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES |
| Pursuant to Fed.R.Bankr.P. 1009(a) and Local Bankruptcy Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment as follows: |
| Ronda Winnecour, Trustee Suite 3250- USX Tower 600 Grant St. Pittsburgh, PA 15219 |
| Office of the U.S. Trustee Suite 970- Liberty Center 1001 Liberty Ave. Pittsburgh, PA 15222 |
| Jennifer Richnafsky, Esquire |

Jennifer Richnafsky, Esquire Sherrard, German, and Kelly PC 535 Smithfield St.- Suite 300 Pittsburgh, PA 15222

Sysco Corp. Attn: Tom Bené, CEO 1390 Enclave Parkway Houston, TX 77077-2099

November 25, 2019 DATE /s/ Abagale Steidl Abagale Steidl, Esquire Attorney for the Debtor

STEIDL & STEINBERG 2830 Gulf Tower 707 Grant Street Pittsburgh, PA 15219 (412) 391-8000 asteidl@steidl-steinberg.com PA I.D. No. 319217

Note: An amended matrix of creditors added by the amendment must be submitted on disk with the amendment. Attorneys filing electronically on the Case Management/Electronic Case Filing System may add creditors to the case electronically.

| Case | e 19-20120-GLT | Doc 49 Filed | _ | tered 11/25/19 Lof 11 | 11:43:49 | Desc Main |
|---------------------|--|--------------------------------|------------------------------|-----------------------------------|-------------------------------------|----------------------------------|
| Fill in this info | rmation to identify your | case: | | | | |
| Debtor 1 | Pascal R. Passag | a | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Colleen M Passag | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | WESTERN DISTRICT | OF PENNSYLVANIA | | | |
| Case number | 19-20120 | | | | | |
| (if known) | | | | | | heck if this is an mended filing |
| Official For | rm 106 <u>D</u> • D: Creditors \ | Who Have Cla | aims Secure | d by Propert | у | 12/15 |
| | and accurate as possible. If the Additional Page, fill it out 1). | | | | | |
| 1. Do any credito | rs have claims secured by y | our property? | | | | |
| ☐ No. Che | ck this box and submit this | form to the court with y | our other schedules. Y | ou have nothing else t | o report on this fo | rm. |
| Yes. Fill | in all of the information be | low. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| 2. List all secure | ed claims. If a creditor has mo | re than one secured claim | list the creditor separately | Column A | Column B | Column C |
| for each claim. If | more than one creditor has a e, list the claims in alphabetical | particular claim, list the oth | er creditors in Part 2. As | Amount of claim Do not deduct the | Value of collater that supports the | |

2.1 Citi Mortgage Describe the property that secures the claim: Creditor's Name 123 Braddock Road Avenue Mount Pleasant, PA 15666 Westmoreland County P.O. Box 9438 As of the date you file, the claim is: Check all that Department 0251 apply. Gaithersburg, MD 20898 \square Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. ☐ Debtor 1 only

 $\hfill\square$ An agreement you made (such as mortgage or secured Debtor 2 only \square Statutory lien (such as tax lien, mechanic's lien) ■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit Mortgage ☐ Check if this claim relates to a Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number

\$51,048.00

\$85,000.00

\$0.00

Official Form 106D

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| | Pascal R. Passaga | | Case number (if known) | 19-20120 | |
|-------------------|---|--|------------------------|-------------|------------|
| | First Name Middle N | ame Last Name | | | |
| | Colleen M Passaga | | | | |
| ŀ | First Name Middle N | ame Last Name | | | |
| 2.2 Equi | ant Financial ices | Describe the property that secures the claim: | \$4,033.41 | \$14,000.00 | \$0.00 |
| Creditor | r's Name | Flagship Resorts 60 N Maine Ave Atlantic City, NJ 08401 Atlantic County Value provided was the purchase price. | | | |
| _ | Box 78843 enix, AZ 85062-8843 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| Number | r, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | the debt? Check one. | Disputed Nature of lien. Check all that apply. | | | |
| Debtor 1 | only | ☐ An agreement you made (such as mortgage or s | secured | | |
| Debtor 2 | only | car loan) | | | |
| Debtor 1 | and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| | one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| | this claim relates to a nity debt | Other (including a right to offset) Timeshall | re | | |
| Date debt w | as incurred | Last 4 digits of account number 6412 | 2 | | |
| | Main Financial | Describe the property that secures the claim: | \$23,149.00 | \$14,675.00 | \$8,474.00 |
| 2160 Moui | rs _{Name} Summit Ridge Plaza nt Pleasant, PA 6-1992 | 2016 Kia Optima EX 30000 miles Good condition. Location: 1291 West Laurel Circle, Mount Pleasant PA 15666 As of the date you file, the claim is: Check all that apply. Contingent | | | |
| Number | r, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| | | ☐ Disputed | | | |
| Who owes | the debt? Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 Debtor 2 | • | An agreement you made (such as mortgage or s car loan) | secured | | |
| Debtor 1 | and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| ☐ At least o | one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| | this claim relates to a nity debt | Other (including a right to offset) Automob | pile | | |
| Date debt w | as incurred | Last 4 digits of account number 9581 | <u> </u> | | |

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| Debtor 1 Pascal R. Passaga | | Case number (if known) | 19-20120 |
|---|---|---|---------------------|
| First Name Middle N | Name Last Name | | |
| Debtor 2 Colleen M Passaga | | | |
| First Name Middle N | Name Last Name | | |
| 2.4 PNC Bank | Describe the property that secures the | claim: \$92,732.02 | \$125,000.00 \$0.00 |
| Creditor's Name | 1291 West Laurel Circle Mount | t | |
| | Pleasant, PA 15666 Westmore | eland | |
| | County | | |
| 2730 Liberty Avenue | As of the date you file, the claim is: Che apply. | eck all that | |
| Pittsburgh, PA 15222 | Contingent | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | |
| | ☐ Disputed | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | |
| ☐ Debtor 1 only | ☐ An agreement you made (such as mor | rtgage or secured | |
| Debtor 2 only | car loan) | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mecha | nic's lien) | |
| \square At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) | ortgage | |
| Date debt was incurred 2011 | Last 4 digits of account number | | |
| | | | |
| Add the dellar value of your entries in (| Column A on this page Write that number | thorn: \$470.062 | 42 |
| If this is the last page of your form, add | Column A on this page. Write that number | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| Write that number here: | tilo donai value totale nom an pages. | \$170,962 | .43 |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| | | | Document | Page 6 o | of 1 | 1 | | |
|-------------------------|---|---|---|--|--------------------|---|---|--|
| Fill | in this information to identify you | ır case: | | | | | | |
| Deb | otor 1 Pascal R. Passa | na | | | | | | |
| | First Name | Middle | Name | Last Name | | | | |
| Deb | otor 2 Colleen M Pass | aga | | | | | | |
| (Spo | use if, filing) First Name | Middle | Name | Last Name | | | | |
| Uni | ted States Bankruptcy Court for the: | WESTER | N DISTRICT OF PE | NNSYLVANIA | | | | |
| 0 | | | | | | | | |
| | se number 19-20120 | | | | | | □ Check | if this is an |
| (| , | | | | | | | ded filing |
| _ ւ | ::-! | | | | | | | |
| | icial Form 106E/F | A/I 11- | | 01-1 | | | | 40/45 |
| | hedule E/F: Creditors \ s complete and accurate as possible. | | | | | | | 12/15 |
| Sche Sche left. A | executory contracts or unexpired leasedule G: Executory Contracts and Unesdule D: Creditors Who Have Claims S Attach the Continuation Page to this peand case number (if known). 11: List All of Your PRIORITY I | xpired Leases (ecured by Prop age. If you have | Official Form 106G). I erty. If more space is e no information to re | Do not include an needed, copy the | ny cred e Part | ditors with partially s you need, fill it out, | ecured claims that a number the entries i | are listed in in the boxes on the |
| 1. | Do any creditors have priority unsecu | red claims aga | inst you? | | | | | |
| | ☐ No. Go to Part 2. | | | | | | | |
| | Yes. | | | | | | | |
| | List all of your priority unsecured clai identify what type of claim it is. If a claim possible, list the claims in alphabetical or Part 1. If more than one creditor holds a (For an explanation of each type of claim | has both priority rder according to particular claim, | and nonpriority amoun to the creditor's name. If list the other creditors i | its, list that claim h you have more th in Part 3. | nere ar nan two | nd show both priority a | and nonpriority amour aims, fill out the Conti | nts. As much as inuation Page of Nonpriority |
| 0.4 | 1 a caa | | | | | 444 000 00 | amount | amount |
| 2.1 | Commonwealth of PA Priority Creditor's Name | | Last 4 digits of accou | nt number <u>798</u> | 35 | \$11,000.00 | \$11,000.00 | \$0.00 |
| | Department of Revenue Department 280905 Harrisburg, PA 17128-090 | | When was the debt in | curred? | | | - | |
| | Number Street City State Zip Code | | As of the date you file | e, the claim is: Ch | neck a | ll that apply | | |
| | Who incurred the debt? Check one. | | ☐ Contingent | | | | | |
| | Debtor 1 only | | ☐ Unliquidated | | | | | |
| | Debtor 2 only | | ☐ Disputed | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | | Type of PRIORITY un | secured claim: | | | | |
| | ☐ At least one of the debtors and ano | ther | ☐ Domestic support o | bligations | | | | |
| | ☐ Check if this claim is for a comm | unity debt | ■ Taxes and certain of | other debts you ow | ve the | government | | |
| | Is the claim subject to offset? | | lacksquare Claims for death or | personal injury wh | hile yo | u were intoxicated | | |
| | ■ No | | Other. Specify | | | | | _ |
| | Yes | | | | | | | |
| | | | | | | | | |
| Par | t 2: List All of Your NONPRIOR | ITY Unsecure | ed Claims | | | | | |
| 3. | Do any creditors have nonpriority uns | secured claims | against you? | | | | | |
| | ☐ No. You have nothing to report in this | part. Submit thi | is form to the court with | your other schedu | ules. | | | |
| | Yes. | | | | | | | |
| 4. | List all of your nonpriority unsecured | claims in the a | lphabetical order of th | ne creditor who h | olds e | each claim. If a credit | or has more than one | nonpriority |
| | unsecured claim, list the creditor separat than one creditor holds a particular claim | tely for each clain | m. For each claim listed | d, identify what typ | e of cl | laim it is. Do not list cla | aims already included | in Part 1. If more |

Total claim

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| | Pascai R. Passaga Colleen M Passaga | Case number (if known) 19-20120 | |
|-----|--|---|------------|
| 4.1 | ADT Security Services | Last 4 digits of account number 2811 | \$240.00 |
| | Nonpriority Creditor's Name 3190 S. Vauhn Way | When was the debt incurred? | |
| | Aurora, CO 80014 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | • | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | lacksquare Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Security services. | |
| 4.2 | Capital One Bank Nonpriority Creditor's Name | Last 4 digits of account number 8350 | \$4,199.00 |
| | PO Box 71083 | When was the debt incurred? 2007-2018 | |
| | Charlotte, NC 28272-1083 | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | _ | |
| | Debtor 1 only | Contingent | |
| | Debtor 2 only | Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | ■ Other Specify Gas, bills, food, clothing | |
| 12 | Observe Observe | | 40.470.00 |
| 4.3 | Chase Slate Nonpriority Creditor's Name | Last 4 digits of account number 0606 | \$3,176.00 |
| | PO Box 15123 | When was the debt incurred? 2011-2018 | |
| | Wilmington, DE 19850-5123 | - As of the date of the desired Check all the tend | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | П | |
| | Debtor 2 only | ☐ Contingent | |
| | _ | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐Yes | ■ Other. Specify repairs, new water tank. | |
| | | | |

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| | Pascai R. Passaga Colleen M Passaga | Case number (if known) | 9-20120 |
|-----|--|--|-------------|
| 4.4 | Chase Slate Nonpriority Creditor's Name | Last 4 digits of account number 8231 | \$2,972.00 |
| | PO Box 15123 Wilmington, DE 19850-5123 | When was the debt incurred? 2011-2018 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that report as priority claims | you did not |
| | ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Gas, food, shoes. | |
| 4.5 | Comenity Capital Bank Nonpriority Creditor's Name | Last 4 digits of account number 5896 | \$2,529.00 |
| | 2420 Sweet Home Road, Suite 150 Amherst, NY 14228-2244 | When was the debt incurred? | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that report as priority claims | you did not |
| | ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Supplies, food, gifts. | |
| 4.6 | Discover | Last 4 digits of account number 9088 | \$6,544.00 |
| - | Nonpriority Creditor's Name PO Box 742655 | When was the debt incurred? 2014-2018 | |
| | Cincinnati, OH 45274-2655 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | To or the date you me, the diam to: oncok an that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that | you did not |
| | Is the claim subject to offset? | report as priority claims | , |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | ■ Other. Specify bills, food, gas, materials for busine supplies. | ess, |

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| | Pascal R. Passaga Colleen M Passaga | | Case number (if known) 19-20120 | |
|---|---|---|---|------------|
| | One Main Lending | Last 4 digits of account number | 4734 | \$2,453.50 |
| | Nonpriority Creditor's Name 2160 Summit Ridge Plaza Mount Pleasant, PA 15666-1992 | When was the debt incurred? | | |
| - | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Ioan | | |
| | Sears Credit Cards | Last 4 digits of account number | 8970 | \$4,000.00 |
| | Nonpriority Creditor's Name PO Box 9001055 Louisville, KY 40290-1055 | When was the debt incurred? | 2013 | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | • | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | □ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-shari | ng plans, and other similar debts | |
| | Yes | Other. Specify Appliances | S | |
| | Synchrony Bank/Care Credit | Last 4 digits of account number | | \$3,350.48 |
| | Nonpriority Creditor's Name c/o Apothaker Scian PC PO Box 5496 | When was the debt incurred? | | |
| | Mount Laurel, NJ 08054-5496 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | , | это орргу | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | ed claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepreport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify MJ-10311- | vices. -CV-0000198-2017 | |

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| | 1 Pascal R. Passaga 2 Colleen M Passaga | Case number (if known) 19-20120 | |
|-----|--|---|-------------|
| 4.1 | | | |
| 0 | Sysco Corporation | Last 4 digits of account number | \$32,651.28 |
| | Nonpriority Creditor's Name Jennifer Richnafsky, Esquire Sherrard, German, and Kelly PC 535 Smithfield St Suite 300 Pittsburgh, PA 15222 | When was the debt incurred? 2018 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | lacktriangle Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify debts unsecured judgment lien for business | |
| 4.1 | Tag Holdings LLC | Last 4 digits of account number | Unknown |
| | Nonpriority Creditor's Name 30260 Oak Creek Dr Wixom, MI 48393 | When was the debt incurred? 2018 | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ☐ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ■ Debtor 1 and Debtor 2 only | ■ Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | ■ Other. Specify Back rent to previous landlord. MJ-10310-CV-0000064-2018 | |
| 4.1 | Walmart Mastercard/SYNCB | Last 4 digits of account number | \$850.29 |
| | Nonpriority Creditor's Name PO Box 960024 Orlando, FL 32896-0024 | When was the debt incurred? | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ☐ Debtor 1 only | □ outsout | |
| | Debtor 2 only | ☐ Contingent | |
| | Debtor 1 and Debtor 2 only | ☐ Unliquidated | |
| | | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Food, clothing, shoes. | |
| | □ 153 | Tood, clothing, sinces. | |

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| Debtor 1 Pascal R. Passaga Debtor 2 Colleen M Passaga | | Case number (if known) 19-20120 | |
|--|--|---|-----------------------------|
| Watson, Mundorff & Sepic LLP | Last 4 digits of account | number | \$7,617.12 |
| Nonpriority Creditor's Name 720 Vanderbilt Road Connellsville, PA 15425 | When was the debt incu | irred? | _ |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, t | he claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY (| unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out report as priority claims | t of a separation agreement or divorce that you did not | t |
| No | ☐ Debts to pension or pr | rofit-sharing plans, and other similar debts | |
| Yes | Other. Specify Leg | al services. | _ |
| Part 3: List Others to Be Notified About a Del | bt That You Already Listed | 1 | |
| b. Use this page only if you have others to be notified a is trying to collect from you for a debt you owe to so have more than one creditor for any of the debts tha notified for any debts in Parts 1 or 2, do not fill out o | omeone else, list the original o It you listed in Parts 1 or 2, lis | creditor in Parts 1 or 2, then list the collection ager | ncy here. Similarly, if you |
| | - | 2 did you list the original creditor? | |
| • | Line 4.10 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured C | laims |
| c/o Tom Bene, CEO 1390 Enclave Parkway Houston, TX 77077-2099 | | ■ Part 2: Creditors with Nonpriority Unsecure | ed Claims |
| | Last 4 digits of account number | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | | Total Claim |
|-----------------------|-----|--|------------|--------|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 11,000.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 11,000.00 |
| | | | | | Total Claim |
| Total | 6f. | Student loans | 6f. | \$ | 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that | 0- | \$ | 0.00 |
| | 6h. | you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 6g. 6h. | \$ | |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount | 6i. | Φ | 0.00 |
| | OI. | here. | Oi. | \$ | 70,582.67 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 70,582.67 |